

5/11/10 ORIENTATION to Medical FOR CO'S

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Introduction to Correctional Healthcare



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3 Topics to Discuss

- What is the difference between Correctional Healthcare and Community Healthcare?
(serious health issues)
- How do you reduce risks from healthcare related to law suits?
- How do you lower the healthcare cost?

**Why do you go to the
doctor?**

The 5 Step Approach to Correctional Healthcare

- Disease - - - - - Health
- Side Effects - - - No Side Effects
- Discomfort - - - - - Comfort
- High Cost - - - - - Low Cost
- High Workload - - -Low Workload

Why does the inmate/patient seek medical attention?

- To get comfortable
- To address their perception of illness
- To handle anxiety
- Wants vs. Needs

**What is your doctor's
goal when he sees you
in the office?**

What is your responsibility for the standard of healthcare in the correctional setting?

- Can not let the inmate's health deteriorate.
- Address Serious Medical Needs
- The inmate must be able to function within the environment.

Deliberate Indifference

- What is deliberate indifference

When you know something is
wrong and do nothing about it

- Can the jail staff be sued for
deliberate indifference

The 8th Amendment Estelle vs. Gamble

- **Guarantees access to healthcare
(Does not guarantee choice of
treatment)**
- **Competent Medical Opinion**
- **The doctors orders are followed**

Four levels of healthcare in a correctional setting

1. The Inmate –(Commissary: Inmate Education)

- 1% hydrocortisone cream – 10 packets
- Antacid tablets – no limit
- Antifungal cream
- Dandruff Shampoo
- Ibuprofen 200 mgs – 10 packets of 2 each
- Triple antibiotic ointment – 10 packets
- Tylenol 325 mgs – 10 packets of 2 each

Four levels of healthcare in a correctional setting

2. Nurse/Medical Officer

- Proper Approach to the Inmate
- Protocol Manual (yellow book)

When using Protocols:

Protocols are designed to assist the staff in the gathering of information to be communicated to the medical staff. The Protocols are not intended to establish a standard of medical care and are not standing orders. All treatments must be ordered and approved by a Nurse Practitioner, Physician Assistant, or a Physician.

Proper Sick Call Technique

- Never be confrontational
- Listen without interrupting the patient
- Use a sad but glad statement
- Express empathy
- Ask questions to clarify issues
- Do a problem focused examination
- Find out what the patient wants

Proper Sick Call Technique

continued

- Explain what you can/cannot do
- Discuss alternatives
- Take appropriate action
- Follow-up to ensure appropriate patient care
- Follow-up to ensure the problem is resolved/controlled

Four levels of healthcare in a correctional setting

3. Physician

4. Off-site

Line of Authority

- Site Physician overrules community physician
- Sheriff overrules site physician

How to reduce lawsuit risk in the correctional setting

- Take no medical responsibility
 - Determine Medical Authority
 - Use a physician trained in correctional medicine
 - Ask for documentation of correctional malpractice insurance from your physician
 - Correctional officers to refer to medical authority
- Written Medical Policies and Procedures
 - These Policies & Procedures should flow with the Jail Policies & Procedures

Chronic illnesses in the correctional setting

1. Diabetes
2. Asthma
3. Seizures
4. Infectious Diseases
 - a. HIV
 - b. Hepatitis
 - c. Staph
5. HTN/CAD

Pregnancy

1. Testing
2. Spontaneous Abortion
pad rule
3. Methadone usage

Mental Health

1. Serious Mental Illness – Axis 1
2. Behaviors – cutters – Axis II

Main Cause of Death in Correctional Facilities

- 1. Suicide**
- 2. Cardiac**
- 3. Asthma**

Dentistry

1. Standard of Care

2. Serious Dental Issues

Emergency Issues

1. Bleeding
2. Chest pain
3. Seizures
4. Fractures
5. Alcohol /Drug Withdrawal

Special Problems

Seizures

- Call the doctor
- Is there a history of alcohol/drug use

Diets

1. Diabetic
2. Pregnancy
3. Food Allergy
4. Religious Diet

Housing Issues

1. Mattresses
2. Pillows
3. Shoes
4. Low Bunk
5. Contact lens
6. Hearing aids
7. Glasses

Drug & Alcohol Withdrawal

- Fit for confinement policy
- Signs of alcohol withdrawal
 - They are drunk
 - They have developed tremors (shaky) of hand
- Signs of drug use
 - Mood swings
 - Check pupils
- Call the Doctor for orders

Open Discussion